

EXHIBIT A

innovATe Extension Proposal

Athletic Healthcare in Traditionally Under-Resourced High School Populations – Innovative Strategies for Introducing Standard of Care Athletic Training Services

In 2020, the Honorable Anita B. Brody approved \$3 million dollars from the Education Fund established as part of the National Football League Players' Concussion Injury Litigation to be allocated to the innovATe Project. The mission of the innovATe project, which is administered through the Korey Stringer Institute (KSI) at the University of Connecticut, is to increase access to medical care provided by an athletic trainer for secondary school athletes in under-resourced communities through the provision of funding, advocacy, education, mentorship, and strategic support to school districts and through partnerships with local medical services.

As originally proposed, the innovATe project was established to fund 10-12 school districts in under-resourced communities to hire and retain much-needed athletic trainers, a critical step in protecting the health and safety of the hundreds or thousands of student athletes at these schools. Each school selected, receives funding for three-years and to help ensure self-sustainability at the end of the funding period, schools engage in collaborative community-based partnerships with local healthcare professionals and Settlement Class Members to create sports medicine programs that will continue beyond the length of funding.

Since 2020, the KSI a recognized expert in the field of sports health and safety with significant experience managing multi-million-dollar programs, has overseen and administered the innovATe project. The KSI has used its expertise to develop the grant program and eligibility criteria, administer the program, distribute funds to school districts, and help develop relationships with community partners, NFL retired players, and athletic training mentors. The KSI has been in constant communication with Class Counsel who has reviewed and reported the progress of innovATe to the Special Masters of the NFL Concussion Settlement Program.

At this time, 4 school communities have been selected for the third and final innovATe cohort per the terms of the original court agreement. This will be the last group to receive support and funding through the innovATe project

With more than 30% of high schools with athletics in the United States that still have no access to the medical care an athletic trainer is provides, there is still a great need for support. Given the success of the program, the KSI is petitioning the court to seek additional funds to support additional innovATe cohorts. The KSI is willing to continue managing this project to help more districts hire athletic trainers.

The Critical Health and Safety Role Played By Athletic Trainers:

Approximately 8 million high school students are currently participating in interscholastic sports annually. While research supports the many benefits of sport, there are inherent risks associated with sport participation. Many of the risks associated with sport participation can be reduced with the presence and action of a qualified health care provider. Many health care organizations encourage hiring at least one athletic trainer at all high schools, but we know that more than 1/3 of high schools in the United States with sports programs have no access to athletic training services. It is worth noting that data reveals large health disparities and that gaps in athletic training services are associated with socioeconomic status of the schools.

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The funding for innovATe was made available through the Education Fund Established as part of the National Football League Players' Concussion Injury Litigation. Research has shown high school athletes with access to an AT had more concussion knowledge and the level of athletic trainer availability positively influenced the reported incidence of sport-related concussions as well as post-concussion management activities among high school student athletes.

Unfortunately, athletes without access to an athletic trainer were more likely to believe it was okay to continue to play with symptoms and/or a concussion.

While concussion is of extreme importance, athletic trainers are trained in 5 domains, including the management of sport-related medical emergencies. Recent events have brought a lot of attention to cardiac arrests and the importance of onsite medical providers. A sudden cardiac arrest in sport can happen at any time, in any sport, at any level of competition. Sudden cardiac arrest is the leading cause of death in sports, over 60% of all catastrophic injuries in sports can be attributed to sudden cardiac arrest. A recent study found that 83% of athletes who sustained a sudden cardiac arrest survived if an athletic trainer was on-site and involved in the resuscitation and 89% survived if an on-site automatic external defibrillator was used in the resuscitation.

It is the belief of the KSI that all athletes deserve access to high quality and timely healthcare and that that care should not be dependent on income, geography, level of competition, or any other factor. The KSI advocates for all athletes to have access to athletic trainers and the innovATe project has allowed us to work towards that goal.

Current Overview of the innovATe project (June 2020-June 2023)

The innovATe project has already had incredible success in increasing access to athletic training services in under-resourced communities across the United States. Currently, the KSI is providing funding for 7 school districts through the innovATe project and have selected 4 more school communities to receive support and funding as part of the 3rd cohort. These communities are currently completing the required financial documents and we anticipate athletic trainers will be hired in the summer of 2023. Below is a brief highlight of the work accomplished in the first 3 years of the project.

1) Year 1: June 2020-June 2021

- a. Grant program development
- b. Promote the innovATe project to recruit potential applicants
- c. 23 applicants submitted pre-proposal applications
- d. Built partnerships with Mueller, PFATS, Defibtech, and Kestrel in order to donate supplies to school districts selected for funding
 - i. PFATS identified 2 athletic training mentors for each school district
- e. Established grant review committee
- f. Coordinated with NFL Alumni Association to start identifying former NFL players who would be interested in supporting school districts
- g. 4 school districts were selected to received funding as part of the first cohort
 - i. Boston Public Schools, Cincinnati Public Schools, Oakland Athletic League, Stewart and Early Counties
 1. 4666 student athletes
 2. Each school identified a community medical partner

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- 2) Year 2: June 2021-June 2022
 - a. Schools in cohort one began receiving funding and hiring Athletic Trainers
 - b. Continue to promote the innovATe project to recruit potential applicants
 - c. 17 applicants submitted pre-proposal applications
 - d. Ongoing support from Mueller, PFATS, NFL Alumni Association, and Defibtech
 - e. innovATe director, Dr. Christianne Eason traveled to Boston, California, Cincinnati, and Georgia to visit all cohort 1 innovATe schools to see the impact the athletic trainers were having in the community
 - f. 3 school districts were selected to receive funding as part of the second cohort
 - i. Baltimore City Schools, Mingo County West Virginia, Abbeville County School District
 1. 2038 student athletes
 2. Each school identified a community partner
- 3) Year 3: June 2022- today
 - a. Schools in cohort two began receiving funding and hiring Athletic Trainers
 - b. Continue to promote the innovATe project to recruit potential applicants
 - c. 28 applicants submitted pre-proposal applications
 - d. Application deadline for the 3rd cohort was the end of February and 4 more school communities have been selected to receive funding through the innovATe project
 - i. Dignity Health Arizona, Los Angeles Unified School District, Sumter County Georgia, Williamsburg County South Carolina
 - e. Based on current terms of the innovATe contract, this would be the last cohort to receive funding

The original goal of the project was to increase access to medical care provided by an athletic trainer for secondary school athletes in under-resourced communities. The table on the following page highlights the demographics of the 11 school districts that are currently receiving support through the innovATe project.

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School District	# of Students	# of Athletes	Title 1	Free Lunch	Avg Trauma ½ Center	Avg EMS Response	Avg Income	Poverty Rates	Uninsured Rates	Race/Ethnicity
Boston Public	3020	940	Y	Y	4.8 miles	13.3 minutes	\$75,843	26.60%	1.40%	White 67.1%, Black 24.3%, Hispanic 23%
Cincinnati Public	1670	260	2/3 Y	2 100% (3rd 30.53%)	10 miles	13 minutes	\$60,251	18.60%	3.90%	White 67.6%, Black 26.6%, Hispanic 3.6%
Oakland Athletic League	9341	3216	Y	high % all schools	10 miles	5 minutes	\$107,589	8.90%	2.30%	White 35.5%, Black 23.8%, Hispanic 27%
Stewart and Early County	649	250	1 of 2 Y	100%	30-40 miles	7 minutes	\$34,566	34.70%	6.90%	White 45.7%, Black 48.5%, Hispanic 33%
Baltimore Public	2,371	887	1 of 2 Y	Y	1 – 5 miles	7-12 mins	\$52,164	20%	6.80%	White 29.7%, Black 62.3%, Hispanic 5.4%
Abbeville	941	790	Y	Y	52 & 40 miles	5 mins	\$43,090	15.30%	13.70%	White 70.2%, Black 27.6%, Hispanic 1.6%
Mingo County	1036	361	Y	Y	42 miles	45 mins	\$35,454	24.90%	9.70%	White 96.3%, Black 2.0%, Hispanic 0.9%
Dignity Health	5,786	1834	Y	Avg 29%	~ 2 miles	4 minutes	\$94,613	7.6%	6.0%	White 58.4%, Black 5.9%, Hispanic 22.6%, Asian 12%
LAUSD	6,555	1430	Y	100%	~ 3 miles	3-9 minutes	\$77,456	14.2%	9.00%	White 32.5%, Black 8%, Hispanic 48%, Asian 15%
Sumter County	1511	459	Y	100%	~ 62 miles	~12-13 minutes	\$36,687	24.2%	12.00%	White 39.8%, Black 51.5%, Hispanic 6%
Williamsburg	921	450	Y	100%	~ 40 miles	15 minutes	\$40,124	22.4%	9.80%	White 33%, Black 63.4%, Hispanic 2%

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KSI Deliverables

The KSI is proposing that we continue to lead the administration of the innovATe project to bring athletic trainers to under-resourced communities for three more cohorts. The KSI would continue to promote the program, recruit applicants, oversee the grant, assist districts in establishing partnerships with local medical providers, engage with awardees, NFL Alumni Association, and athletic training mentors. Because the innovATe project is already up and running successfully it would be a seamless transition to continue accepting applicants beyond the length of the original terms of the agreement. The KSI plans to administer the program as outlined below:

Continued Support and Funding on Remaining School Districts

At this time the KSI has selected 11 school districts who are currently receiving funding through the innovATe project. The KSI is committed to continue supporting and funding each of these districts per terms of the grant and the original court order.

- 1) Cohort 1: Boston Public Schools, Oakland Athletic League, Stewart and Early Counties (GA), Cincinnati Public Schools
 - a. Currently in their second year of funding
 - b. Will continue receiving funding and support from the KSI through June 2024
- 2) Cohort 2: Baltimore City Schools, Mingo County (WV), Abbeville County School District (SC)
 - a. Currently in their first year of funding
 - b. Will continue receiving funding and support from the KSI through June 2025
- 3) Cohort 3: Currently Finalizing Agreements with 4 School Communities Selected to Receive Funding
 - a. 28 school districts submitted pre-proposal applications to ensure eligibility to received funding through the innovATe project
 - b. Applications were due the end of February (2023)
 - c. 4 school districts were selected to receive funding and support from the KSI in March (2023)
 - i. Dignity Health Arizona, Los Angeles Unified School District, Sumter County Georgia, Williamsburg County South Carolina
 - d. Schools selected in this cycle will begin to receive funding in the summer of 2023 which will last until June 2026

Grant Procurement

The KSI has already developed the grant criteria and application. The KSI would continue to promote the grant program and recruit eligible applicants by notifying and educating:

- State high school athletic associations
- State athletic training associations and their secondary school athletic training committees
- Regional athletic training outreach providers; and
- Individual high school administrators (principals, athletic directors, coaches, superintendents)

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The KSI will manage any inquiries from potential applicants regarding the grant application process and any necessary follow-up.

The KSI will collect and organize all applications, which will include a pre-proposal to ensure applicants meet eligibility criteria and a pre-review to confirm application is complete upon submission. The KSI will organize these documents for review by the grant review committee which includes two KSI employees and 5 sports medicine specialists who are not employed by the KSI.

Review of Grants

The KSI will be responsible for managing review of all submitted and completed applications and distributing applications to the grant review committee which consists of:

- 2 current KSI employees (both athletic trainers)
- 3 High School Athletic Trainers who are not employed by the KSI
- 2 Sports Medicine Physicians who are not employed by the KSI

The KSI will direct the review committee through the review process which involves each committee member individually reviewing and scoring each application. The scores of each individually assessed application will be compiled by the KSI and the top scoring districts will be selected for funding. The applications are graded and scored based on 5 criteria:

- 1) Need – 25%
 - a. The application clearly demonstrates the district's need for financial assistance and need for improved student-athlete care
- 2) Impact – 25%
 - a. The application articulates the anticipated impact of the athletic training program in the district
- 3) Grant Implementation Plan – 15%
 - a. Application includes a detailed budget plan that includes plans to obtain essential equipment and supplies for use by an athletic trainer.
 - b. Application includes a description of space that can be used as an athletic training room at each school or explains how the athletic trainer will be able to deliver medical services to schools and student athletes.
 - c. Application demonstrates a complete and thoughtful hiring strategy.
- 4) Program Sustainability Potential – 20%
 - a. Application demonstrates willingness of applicant to sustain an athletic training program through the period of grant funding and beyond.
 - b. Application includes letter(s) of support from medical partner/outreach provider.
- 5) Quality of Application – 15%
 - a. Overall quality of the application including narrative strength, completeness, and presentation and clarity of financial information.

Following the review committee's review of applications, the KSI will be responsible for reporting the decisions of the review committee to Class Counsel and then will notify the grant award winners.

Grant Management

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The KSI will distribute grant dollars to the school districts;

The KSI will manage the three-year grant commitment with each of the grant winning school districts;

The KSI will develop a system to review grant reports and document compliance of each school for required and recommended items outlined by the KSI

The KSI will distribute all grant funds accordingly; and

The KSI will report the outcome of its review to Class Counsel who will share the information with the NFL Special Masters of the NFL Concussion Settlement Program.

Education/Implementation Agenda

After a school is informed that they have been awarded a grant, the KSI will be available to assist the school with:

- Promoting the new athletic training positions
- Drafting press releases to help garner local support
- Coaching education and drafting of emergency action plans and policies and procedure documents (including best-practice policies specific to the prevention, identification, and management of concussions)

After the Athletic Trainer Has Been Hired

Serve as a liaison between the hired athletic trainer, school, local medical providers, and other state/regional/national organizations to establish or support effective communication among different entities

Connecting the athletic trainers with mentors, including volunteers from the Professional Football Athletic Trainers Society; and

Create a structure to disseminate educational materials and support effective implementation of grant program

Approximate Costs/Parameters of the Program

- 1) School districts will receive funding for a three-year period
- 2) 12 school districts (this is based on 3 more cohorts, each with 4 school districts) – receiving a total of \$180,000/school district
- 3) We will aim to utilize a total grant school allotment of \$2.16 million dollars in funding (that would be 12 school districts at \$180,000/school district)
- 4) The KSI project management fee would be about \$140,000 per year for 5 years (\$700,000) Approximate costs per year below:
 - a. Year 1: June 2024 – June 2025 - \$120,000
 - b. Year 2: June 2025 – June 2026 - \$165,000
 - c. Year 3: June 2026 – June 2027 - \$165,000
 - d. Year 4: June 2027 – June 2028 - \$140,000
 - e. Year 5: June 2028 – June 2029 - \$110,000
- 5) UConn indirect costs would be 8% of total project cost for money coming from a not-for-profit (total cost of project pre-indirects equals \$2.86 million)
 - a. Approximately \$228,800

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- b. Typical indirect fees at UConn are much higher (60%), but this rate was negotiated given the non-profit status of the funding source
- 6) We would have the following schedule
 - a. 1/3 of school districts start summer 2024 (last funding 2027)
 - b. 1/3 of school districts start summer 2025 (last funding 2028)
 - c. 1/3 of school districts start summer 2026 (last funding 2029)
- 7) Total Costs – Approximately \$3,088,800